

# Exhibit $\beta$

# Separator

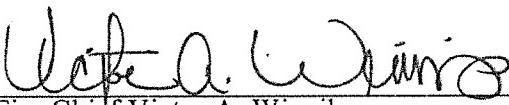
IN THE UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF OHIO  
EASTERN DIVISION

HAYDN ZEIS, Administrator of the ) CASE NO: 5:16cv2331  
Estate of Jordn Lukas Miller, Deceased, ) JUDGE JOHN R. ADAMS  
Plaintiff, )  
v. ) AFFIDAVIT OF FIRE CHIEF  
SPRINGFIELD TOWNSHIP, OHIO, et ) VICTOR A. WINCIK  
al., )  
Defendants. )

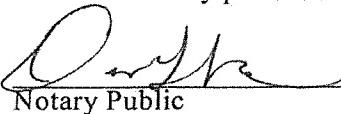
Now comes the affiant, Fire Chief Victor A. Wincik, first being duly sworn according to law and states as follows:

1. I am the Fire Chief of Springfield Township, Summit County, Ohio.
2. The attached document is a true and accurate copy of the EMS run report from the Springfield Township Fire Department dated September 10, 2015.

AFFIANT FURTHER SAYETH NAUGHT.

  
\_\_\_\_\_  
Fire Chief Victor A. Wincik

SWORN to before me and subscribed in my presence this 17<sup>th</sup> day of July, 2017

  
\_\_\_\_\_  
Notary Public



Denise G. Bolen  
Resident Summit County  
Notary Public, State of Ohio  
My Commission Expires: 06/2019

Exhibit B



Incident# 15-0001816 Pt# 0001  
FDID# 77123

## Springfield Township Fire Department

Alarm Date 09/08/2015

Incident No 15-0001816	Onset Date / /	Onset Time	Location Type	
Crash No	Trauma ID	911 Used 1 911 USED	1135 Home/Residence	
Scene Address		Station 10 Shift B	Response Code to Scene	
1019 ABINGTON RD /Springfield Township, OH 44312			1 Emergency	
Township SPR	District 3110	County 77	Highest Experience Level at Scene	
Mutual Aid None	Census Occupancy		Lights & Siren to Scene?	
			39 Lights and Sirens	
Patient # 000001 Name MILLER, JORDN L Address 909 MILO WHITE Rm Phone CITY AKRON St OH Zip 44312 Race White Gender DOB 04/09/1991 Age 24 yrs 4 mos SSN 999-99-9999 Primary Physician Dispatched For Psychiatric Problems Type of Service 30 911 Response (Scene) Chief Complaint UNRESPONSIVE Provider Impression 169 OVERDOSE Tx Authorization 01 Protocols (Standing Orders) Injury Sustained? No Injury Intent Mechanism of Injury N00 Not Applicable Human Factors Affecting Care 2615 None			<b>Times</b> Dispatch Notified 15:25:00 Unit Notified 15:25:00 Unit Enroute 15:27:00 Arrived Scene 15:29:00 Arrived Pt/Vict 15:30:00 Enroute to Dest 15:41:00 Arrived Dest 15:52:00 Cleared 16:37:00 Back in Service 16:37:00 ALS Arrival	<b>Response Analysis</b> Dispatch 00:00:00 En Route 00:02:00 To Scene 00:02:00 To Pt/Vict 00:01:00 On Scene 00:12:00 Transport 00:11:00 Tot Resp Time 01:12:00 Out of Srv 01:12:00 ALS Response Total Miles Loaded Miles 6.60

Patient Prior Medical History	Factors Affecting EMS Care	Prior EMS Care Given	Safety Equipt Worn by Patient
10000 None (CUR MEDICATIONS)	105 None 150 None 225 None 290 None 360 None	N002 Not Applicable	2187 None

## Injury/Illness Detail

Type	Area	Severity	Primary Symptom	Job Rel?
<b>Basic Vitals</b>				
Time	LOC Airway Resp Rhythm-Effort/Qlty	Pulse Rhythm/Qlty	Skin Cap Refill Bleeding Pupils-L/R Posture	
15:35:00	Unre Endotracheal Absent-Absent	Not A-NA-No Pulse	Not Asse N/A None 4 / 4 Supine	
15:40:00	Unre Endotracheal Absent-Absent	Pr	Not Asse N/A None 4 / 4 Supine	
15:45:00	Unre Endotracheal Absent-Absent	Not A-NA-No Pulse	Not Asse N/A None 4 / 4 Supine	
		Pr		
		Not A-NA-No Pulse		
		Pr		

## Secondary Vitals

Time	Pulse	Resp	Temp	BP	SpO2	Skin Appearance	Eye/Mtr/Vrbl	GCS	RTS	Cardiac
15:35:00	0	0	N/A	0/0	0%	Dry	1 1 1	3	0	Asystole
15:40:00	0	0	N/A	0/0	0%	Dry	1 1 1	3	0	Asystole
15:45:00	0	0	N/A	0/0	0%	Dry	1 1 1	3	0	Asystole

\* Denotes Blood Pressure Reading by Palpation or Doppler

## Procedures Performed

Time	Procedure	Notes	F - Procedure Failed	Staff Id	Attempts
15:32:00	93.931 Airway - Bagged (via BVMask)				1
15:33:00	96.991 Airway-Intubation Confirm Co				1
15:34:00	96.040 Airway-Orotracheal Intubatio				1
15:35:00	89.391 Capnography (CO2 Measurement)				1
15:36:00	89.510 Cardiac Monitor			315	1
15:37:00	89.392 Pulse Oximetry			311	1
15:38:00	38.992 Venous Access-Extremity				1

Inci# 15-0001816 Pt# 0001  
FDID# 77123

Springfield Township Fire Department

Alarm Date 09/08/2015

15:46:00 99.600 CPR - Start Compressions and  
15:47:00 101.500 Contact Medical Control

1  
1

<u>Exposure Precautions Taken</u>		<u>Medications Administered</u>			
Staff Member	Precaution Type	Time	Medication	Staff Id	Dosage
		15:36:00	53865 Naloxone	320	1 MG via Intr
		15:38:00	42800 0.9% Sodium Ch	311	1 KVO (TKO) v
		15:40:00	52040 Epinephrine	311	1 MG/CC via I
		15:42:00	52040 Epinephrine	315	1 MG/CC via I
		15:44:00	52040 Epinephrine	315	1 MG/CC via I
		15:47:00	52040 Epinephrine	315	1 MG/CC via I
		15:48:00	53865 Naloxone	320	1 MG via Intr
		15:50:00	52040 Epinephrine	315	1 MG/CC via I

Disposition

Transported to 1275 Akron City Hospital  
Mode of Transport 1005 ALS, Level 1 Emergency  
Agency Treated With  
Lights/Siren from Scene? Lights and Sirens

Dest Determined by 4990 Closest Facility (none below)

Diverted To

Patient Disposition TATE TREATED AND TRANSPORTED BY EMS

Pulse on Transfer 1 PULSE ON TRANSFER

Insurance

Type	Policy #	Group #	Insured Name
Not Known			

Patient Narrative

A VIOLENT PT WAS TASED BY STPD ONCE TASED PT WAS PLACED IN CUFF WITH PULSE AND RESPS, UPON ARRIVAL OF EMS PT BECAME PULSELESS AND APNIC CPR AND RESPS STARTED CUFFS REMOVED ACLS IN PROGRESS THROUGH OUT TRANS TO HOSPITAL

Officer/Member Making

Signature \_\_\_\_\_  
Officer Name DEWOLF, SHAWN 09/08/2015

Signature \_\_\_\_\_  
Member Name DEWOLF, SHAWN 09/08/2015

Signature \_\_\_\_\_  
Attending Physician

Incif# 15-0001816 Pt# 0001  
FDID # 77123

## Supplemental Report

Alarm Date 09/08/2015

## Springfield Township Fire Department

Incident No 15-0001816	Onset Date / /	Report Date 09/08/2015	Station 10	Shift B	Dispatch 15:25:00
Patient # 001	Name MILLER, JORDN L		SSN 999-99-9999	Gender 650	DOB 04/09/1991

## Cardiac Arrest

Cardiac Arrest Type Yes, After EMS

If Pre-Arrival Arrest

Initial Arrest Rhythm 2325 Asystole

Cardiac Arrest Witnessed? No

Traumatic Arrest? No

Symptoms Exhibited Prior to Collapse? No

&lt; 4 mins 4-8 mins 8-12 mins &gt;12 mins Unk/NA

Bystander CPR Prior to EMS Arrival? No

Bystander Name

Address

City

State Zip

Phone

Times:

Arrest Witnessed

CPR Initiated

CPR Discontinued

First Defib Shock

First Medication

Arrest to CPR

<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				

Arrest to Defib

Arrest to Meds

#Shocks Delivered

Spontaneous Pulse Restored? No

Inci# 15-0001816 Pt# 1  
FDID # 77123Responding Personnel Summary  
Springfield Township Fire Department

Alarm Date 09/08/2015

<u>Staff ID</u>	<u>Name Rank/Position</u>	<u>Unit</u>	<u>Activity</u>	<u>Hours</u>
304	SIMICH, STEPHEN M Captain/DRIVER	3112	MX Medical At Scene	1.20
305	WHITE, BRIAN Lieutenant/JUMPSEAT	3126	MX Medical At Scene	1.20
311	SCHULTZ, STEPHEN M Firefighter Paramedic/DRIVER	3126	MX Medical At Scene	1.20
315	DEWOLF, SHAWN Firefighter Paramedic/LEAD MEDIC	3121	MX Medical At Scene	1.20
320	ATKINSON, KEVIN Firefighter Paramedic/JUMPSEAT	3121	MX Medical At Scene	1.20
329	KEENER, ROB Firefighter Paramedic/JUMPSEAT	3112	MX Medical At Scene	1.20
<b>Total Number of Responding Personnel:</b>			<b>6</b>	<b>Total Hours:</b> 7.20

\* Denotes Driver

Inci# 15-0001816 Pt# 1  
FDID # 77123

Responding Units Summary  
Springfield Township Fire Department

Unit	Response Code	Alarm	Arrival	Response
3121 3121	1 Emergency	15:25:00	15:29:00	00:04:00
3126 CAPT ADMIN TRUCK		15:25:00	15:30:00	00:05:00
3112 3112		15:55:00	15:59:00	00:04:00

Total Number of Responding Units: 3